

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Summary

☒ MHSA

☐ Non-MHSA

Contractor Name: Heritage Clinic
 Program Name: Intensive FSP
 For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37
 Contract Number: 517612
 Amendment Number: 13

This budget will remain in effect throughout the entire contract term unless amended.

RU# or Sub-unit #: 3421, 3431, 34

Cost Center	A	B	C	D	E	F	Program Cost Page 2 Subtotal	Total Program Cost
1 Adult/Child	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults		
2 Service Function	M.H. Services	Crisis Interventn	Medication	CM Brokerage	Com. Outreach	Flexible Support		
3 Full Day, 1/2 day (Day Services Only)								
Gross Cost:								
4 Salaries and Benefits (Schedule I)	541,501.94	10,429.60	86,060.60	467,410.95	48,811.01			1,154,214.10
5 Operating Expenses (Schedule IA)	168,525.50	3,427.34	25,369.12	152,039.81	15,922.36			365,284.13
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	710,027.43	13,856.94	111,429.73	619,450.76	64,733.37	-	-	1,519,498.23
8 Indirect Cost (Schedule III)	98,320.82	1,918.84	15,430.20	85,778.25	8,963.93			210,412.03
9 Adjusted Gross Cost (Lines 7+8)	808,348.26	15,775.77	126,859.92	705,229.01	73,697.30	-	-	1,729,910.26
10 Total Units of Service	3,613	39	542	5,206	1,396			10,795
11 Gross Cost Per Unit of Service	223.76	404.51	234.16	135.47	52.81	-	-	160.26
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service	3,613	39	542	5,206	1,396			10,795
15 Contract Cost per Unit of Service	\$223.76	\$404.51	\$234.16	\$135.47	\$52.81			\$160.26
16 Total Billing Units (M/C & Non-M/C)	289,000	3,900	24,320	333,168	34,891			685,279
17 Contract Cost per Billing Unit	\$2.80	\$4.05	\$5.22	\$2.12	\$2.11			\$2.52
18 Contract Gross Costs	808,348.26	15,775.77	126,859.92	705,229.01	73,697.30	-	-	1,729,910.26
Less Contract Revenues:								
19 Patient Fees								
20 Other Patient Insurance								
21 Medicare	20,739.83		5,170.43					25,910.26
22 Other Revenues: (Specify)								
23 Total Contract Revenues	\$20,739.83		\$5,170.43					\$25,910.26
24 Contract Maximum/Net Cost (Line 18-23)	787,608.43	15,775.77	121,689.49	705,229.01	73,697.30	-	-	1,704,000.00
25 Net Cost per Billing Unit	\$2.73	\$4.05	\$5.00	\$2.12	\$2.11			\$2.49
26 Total SD/MC Billing Units	70,208	947	5,908	80,937				158,000
27 Percentage of SD/MC billing units to total billing units (Line 26/Line16)	24.29%	24.29%	24.29%	24.29%				23.06%
28 Medi-Cal Gross	196,374.18	3,832.45	30,818.42	171,323.14	-	-	-	402,348.19
29 FFP Revenue	98,187.09	1,916.23	15,409.21	85,661.57	-	-	-	201,174.09
30 EPSDT Revenue (for EPSDT Program only)								

Contractor's
 Authorized Signature

Walter / CEO
 Name Title
Debrah Malcane
 Program Monitor's Approval / CAU Approval

Date: 6/29/11

Date: 6/30/11

Approved By:
 (For County Use Only)

FUNDING SOURCE

SD/MC FFP	201,174.09
MAA Medi-Cal	
SAMHSA	
PATH Allocation	
Other	
MHSA (FFP match)	201,174.09
MHSA	1,301,651.81
Contract Maximum	1,704,000.00

C O M P A R A T I V E A N A L Y S I S (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)

Adult/Child	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults		
Service Function	M.H. Services	Crisis Interventn	Medication	CM Brokerage	Com. Outreach	Flexible Support	Page 2	Cost
Budgeted Contract Maximum (Net Cost)	787,608.43	15,775.77	121,689.49	705,229.01	73,697.30			1,704,000.00
Prior Approved Budget Contract Maximum (Net Cost)	746,902.09	15,137.74	36,432.09	695,143.62	135,391.34	74,993.11		1,703,999.99
NET CHANGE/Increase (Decrease)	40,706.34	638.03	85,257.40	10,085.39	(61,694.04)	(74,993.11)	-	0.01
Budgeted Total Billing Units	289,000	3,900	24,320	333,168	34,891			685,279
Prior Approved Budget Total Billing Units	294,000	3,900	8,800	344,000	67,000			717,700
NET CHANGE/Increase (Decrease)	(5,000)		15,520	(10,832)	(32,109)			(32,421)
Budgeted SD/MC Billing Units	70,208	947	5,908	80,937				158,000
Prior Approved Budget SD/MC Billing Units	42,430	563	1,270	49,646				93,909
NET CHANGE/Increase (Decrease)	27,778	384	4,638	31,291				64,091
Budgeted Percentage of SD/MC Units to Total	24.29%	24.29%	24.29%	24.29%				23.06%
Prior Approved Budget Percentage of SD/MC Units to Total	14.43%	14.44%	14.43%	14.43%				13.08%

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
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Contractor Name: Heritage Clinic
Program Name: Intensive FSP
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37
Contract Number: 517612
Amendment Number: 13

Cost Center	G	H	I	J	K	L	M	Program
1 Adult/Child								Cost
2 Service Function								Page 2
3 Full Day, 1/2 day (Day Services Only)								Subtotal
Gross Cost:								
4 Salaries and Benefits (Schedule I)								
5 Operating Expenses (Schedule IA)								
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	-	-	-	-	-	-	-	-
8 Indirect Cost (Schedule III)								
9 Adjusted Gross Cost (Lines 7+8)	-	-	-	-	-	-	-	-
10 Total Units of Service								
11 Cost Per Unit of Service								
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service								
15 Contract Cost per Units of Service								
16 Total Billing Units (M/C & Non-M/C)								
17 Contract Cost per Billing Unit								
18 Contract Gross Costs	-	-	-	-	-	-	-	-
Less Contract Revenues:								
19 Patient Fees								
20 Other Patient Insurance								
21 Medicare								
22 Other Revenues: (Specify)								
23 Total Contract Revenues								
24 Contract Maximum/Net Cost (Line 18-23)	-	-	-	-	-	-	-	-
25 Net Cost per Billing Unit								
26 Total SD/MC Billing Units								
27 Percentage of SD/MC billing units to total billing units (Line 26/Line 16)								
28 Medi-Cal Gross	-	-	-	-	-	-	-	-
29 FFP Revenue	-	-	-	-	-	-	-	-
30 EPSDT Revenue (for EPSDT Program only)	-	-	-	-	-	-	-	-

C O M P A R A T I V E A N A L Y S I S (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)								
Adult/Child								
Service Function								Page 2 TTL
Budgeted Contract Maximum (Net Cost)								
Prior Year Actual Contract Maximum (Net Cost)								
NET CHANGE/Increase (Decrease)	-	-	-	-	-	-	-	-
Budgeted Total Billing Units								
Prior Year Actual Total Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted SD/MC Billing Units								
Prior Year Actual SD/MC Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted Percentage of SD/MC Units to Total								
Prior Year Percentage of SD/MC Units to Total								

Service Function		
Day/Comm Svcs (Mode 10)	24 Hour (Mode 5)	Outpatient (Mode 15)
Intensive (Full SFC 85-89, 1/2 SFC 81-84)	Crisis Residential (SFC 40-49)	M.H. Services (SFC 10-19)
Rehab (Full SFC 95-99, 1/2 SFC 91-94)	Adult Residential (SFC 65-79)	Med. Support (SFC 60-69)
Socialization		Crisis Intervention (SFC 70-79)
Community Services		C.M. Brokerage (SFC 01-09)
MHSA Service Function (no units of service will be reported) - Mode 60		
Client Housing Support (SFC 70)	Client Housing Operating (SFC 71)	Client Flexible Support (SFC 72)
Non-Medi-Cal Capital Assets (SFC 75)	Other Non-Medi-Cal Client Support Svcs (SFC 78)	

*** For Mental Health Services (MHS) units. List budgeted units and billing units by Service Function ***						
Service Function	Assessment	Collateral	Group	Individual	Total	
1 Mental Health Units of Service	14,450	28,900	14,450	231,200	289,000	
2 Billing Units (M/C & Non-M/C)	181	361	181	2,890	3,613	

Contractor Name: Heritage Clinic
Program Name: Intensive FSP
For the Period From: July 1, 2011

To: June 30, 2012

PRIOR APPROVED BUDGET

NET CHANGE OF CURRENT YEAR AND PRIOR APPROVED BUDGETS

REVENUE OF CURRENT YEAR AND FUTURE REVENUE FORECAST								
Salaries and Benefits		Annual Salary	Annualized FTE	Annualized FTE Prog. Admin.	Number of Months	Direct Services Expense	Program Admin. Expense	Total Salary Expense
Staff Position		per FTE	Direct					
101	Program Managers	57,497.64		0.46140	12.00		26,529.41	\$26,529.41
102	Nurses (RN and LVN)	(6,059.77)	0.67200	(0.39200)		31,631.73	(23,400.65)	\$8,231.08
103	LMHC's	(2,671.14)	(0.25050)	(0.00520)		(24,880.87)	(1,448.32)	(\$26,329.19)
104	MHRS's	(3,278.57)	(0.44350)	(0.98900)		(33,934.95)	(42,353.80)	(\$76,288.75)
105	Care Coordinators	30,696.50	3.12250		12.00	95,849.83		\$95,849.83
106	Compliance Officer / QI Officer	92,500.00		0.43830	12.00		40,542.75	\$40,542.75
107	Housing Managers	37,586.67	0.70000	0.50000	12.00	26,310.67	18,793.33	\$45,104.00
108	Senior Peer Coordinators							
109	Occupational Specialists	4,160.00	(0.02500)	0.02500		845.00	1,235.00	\$2,080.00
110	Substance Abuse Specialists	19,440.00	0.10000	(0.10000)		13,776.00	(4,056.00)	\$9,720.00
111	Conservatorship Supervisor	55,000.00		0.05750	12.00		3,162.50	\$3,162.50
112	Regional Managers	(440.61)		0.09580			7,701.73	\$7,701.73
113	Administrative, Program and Office Assistants	(1,348.29)		(0.09500)			(5,528.54)	(\$5,528.54)
114	Billing Coordinator	0.89		0.14587		5,158.27	5,158.27	\$5,158.27

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Schedule I - Salaries and Benefits

Contractor Name: Heritage Clinic
Program Name: Intensive FSP
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37JF
Contract Number: 517612
Amendment Number: 13

115	Fiscal Manager	29,115.32	0.03110	0.28010	12.00	905.49	8,155.20	\$9,060.69
116	Systems and Data Analyst	5,505.71		0.08187			6,338.37	\$6,338.37
117	Case Manager	(29,495.00)	(1.28500)	(1.28500)	(12.00)	(37,901.08)	(37,901.08)	(\$75,802.15)
118	Peer Family Specialist	(26,184.00)	(0.50000)	(0.50000)	(12.00)	(13,092.00)	(13,092.00)	(\$26,184.00)
119								
150								
Sub Total FTE and Salaries			2.12160	(1.28037)	N/A	\$59,509.82	(\$10,163.81)	\$49,346.00
						Total Employee Benefits		24,372.48
						*Salaries & Benefits Total		\$73,718.48

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

Please note (line 118) that we still have staff who function as peer and family specialists, however given that they met the qualifications to be care coordinators we were pleased to change their titles officially. Please also note the net increase in direct FTE versus administration. This was per having a clearer understanding from our COTR as to how she expected these to be broken down, and noting that not all of the direct time will lead to billable or non billable UOS.

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Agreement Budget Schedule IA – Operating Expenses

Contractor Name: Heritage Clinic
Program Name: Intensive FSP
For the Period From: July 1, 2011

Provider Number: 37KJ, 37J1, 37JP
Contract Number: 517612
To: June 30, 2012
Amendment Number: 13

		CURRENT/ PROPOSED BUDGET	PRIOR APPROVED BUDGET	NET CHANGE/ INCREASE (DECREASE)
		Amount	Amount	Amount
Operating Expenses				
1	Building Rent & Leases	85,091.81	96,821.13	(\$11,729.32)
2	Equipment Rent & Leases	50.00	50.00	\$0.00
3	Building Repairs/Maintenance	6,833.00	7,457.00	(\$624.00)
4	Equipment Repair/Maintenance	2,382.00	2,392.00	(\$10.00)
5	*Leasehold Improvements			\$0.00
6	Telephone	22,157.00	36,310.00	(\$14,153.00)
7	Utilities	3,790.00	6,264.00	(\$2,474.00)
8	Supplies Minor Equipment	5,140.23	6,525.00	(\$1,384.77)
9	Office Supplies	6,457.00	7,743.00	(\$1,286.00)
10	Pharmaceutical	50.00	50.00	\$0.00
11	Medical Supplies	50.00	50.00	\$0.00
12	Other Supplies	2,721.49	1,175.00	\$1,546.49
13	Printing	5,650.18	4,132.00	\$1,518.18
14	Insurance: Professional Liability	8,197.14	13,050.00	(\$4,852.86)
15	Insurance: Other	2,749.29	50.00	\$2,699.29
16	*Consultants (from Schedule II)	39,843.61	80,460.00	(\$40,616.39)
17	Staff Development/Training	15,074.51	7,001.00	\$8,073.51
18	Accounting/Auditing/Legal Fees	26,523.00	30,232.00	(\$3,709.00)
19	Other Business Services	4,288.68	5,896.00	(\$1,607.32)
20	24 Hour Program: Food			\$0.00
21	24 Hour Program: Personal Needs Items			\$0.00
22	Laboratory Services	50.00	50.00	\$0.00
23	Travel Local	25,000.00	26,500.00	(\$1,500.00)
24	Client Transportation			\$0.00
25	Dues and Subscriptions	4,488.40	4,339.00	\$149.40
26	*Interest Expense	8,288.00	14,627.00	(\$6,339.00)
27	Tax/License	246.79	913.00	(\$666.21)
28	Gift Cards	0.00	0.00	\$0.00
29	Other: Market St. Usage	23,693.00	23,693.00	\$0.00
30	Flex Funds	66,469.00	66,469.00	\$0.00
	Operating Expenses Total	\$365,284.13	\$442,249.13	(\$76,965.00)

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

Market Street Facility - Usage Fees are in lieu of rent on the property as Heritage Clinic purchased the building in December 2008. the charges are the sum of the variable interest charges on the two loans secured for the purchase and the depreciation charges of \$550/mo based on 2% depreciation over 50 years. Due to less borrowing from the Line of Credit, the interest amount has been decreased from \$14,627 to \$8,288.

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Contract Budget Schedule II – Fixed Assets and Consultants

Contractor Name: Heritage Clinic
Program Name: Intensive FSP
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37JP
Contract Number: 517612
Amendment Number: 13

Fixed Assets					
	Description of Fixed Asset	# of Units		Cost per Unit	Total Cost
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
Total Fixed Assets					

Consultant Agreements – Direct Services						
	Name	Agency	Position Class	Hours	Rate	Amount
14			Geriatric Psychiatrist	203.74	150.00	\$30,561.61
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
Total Direct Services Consultants						\$30,561.61

Consultant Agreements - Program Management Function						
	Name	Agency	Position Class	Hours	Rate	Amount
25	Information Technology			92.82	100.00	\$9,282.00
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
Total Program Management Function Consultants						\$9,282.00

Total Consultant Agreements	\$39,843.61
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County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Contract Budget Schedule III – Indirect Costs

Contractor Name: Heritage Clinic
Program Name: Intensive FSP
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37J
Contract Number: 517612
Amendment Number: 13

	Administrative Salaries and Benefits	Annual Salary	Annualized FTE	% of FTE Allocated	FTE Allocated	Number of Months	Total Salary Expense
	Staff Position	per FTE	Total	To Program	To Program		
1	Executive Staff	130,000.00	0.60	37.48%	0.22	12.00	\$29,234.40
2	Financial Administration	87,272.73	1.10	37.48%	0.41	12.00	\$35,980.80
3	Clinical Administration	54,116.48	2.87	37.48%	1.08	12.00	\$58,211.80
4	HR Administration	53,795.54	1.53	37.48%	0.57	12.00	\$30,848.73
5							
6							
7							
8							
9							
10							
11							
12							
Sub Total FTE and Salaries			6.10	N/A	2.29	N/A	\$154,275.73

	Administrative Operating Expenses	Amount	% Allocated to Program	Indirect Cost
13	Accounting/Auditing/Legal/ADP Fees	500.00	37.48%	\$187.40
14	Mileage	8,000.00	37.48%	\$2,998.40
15	Telephone	11,000.00	37.48%	\$4,122.80
16	Office Supplies	600.00	37.48%	\$224.88
17	Other Business Services	1,500.00	37.48%	\$562.20
18	Staff Development and Training	5,000.00	37.48%	\$1,874.00
19	Insurance	500.00	37.48%	\$187.40
20	Dues and Subscriptions	8,000.00	37.48%	\$2,998.40
21	Equipment Repairs and Maintenance	5,000.00	37.48%	\$1,874.00
22	Travel/Transportation	5,887.54	37.48%	\$2,206.65
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
Admin. Operating Expenses Total		\$45,987.54	N/A	\$17,236.13

	Administrative Consultant Services			
36	Business Consultants	5,000.00	37.48%	\$1,874.00
37				
38				
Admin. Consultant Services Total		\$5,000.00	N/A	\$1,874.00

Total Administrative Benefits	37,026.18
Total Admin. Salaries & Benefits	\$191,301.90
Total Administrative Operating Expenses	\$17,236.13
Total Administrative Consultant Services	\$1,874.00
Total Indirect Costs	\$210,412.03

Indirect Costs Methodology
Indirect Costs are allocated to all programs based on each programs proportiona of direct expenses to overall direct expenses (salaried, benefits and operating)

**County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Summary**

☒ MHSA

☐ Non-MHSA

Contractor Name: Heritage Clinic
Program Name: FSP - Housing
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37
Contract Number: 517612
Amendment Number: 13

This budget will remain in effect throughout the entire contract term unless amended.

RU# or Sub-unit #:

Cost Center	A	B	C	D	E	F	Program Cost	Total Program Cost
1 Adult/Child	Older Adults	Older Adults	Older Adults	Older Adults				
2 Service Function	Housing	Housing	Housing	Housing				
3 Full Day, 1/2 day (Day Services Only)	70	71	72	78				
Gross Cost:								
4 Salaries and Benefits (Schedule I)								
5 Operating Expenses (Schedule IA)	415,600.00	8,000.00	6,000.00	1,000.00				430,600.00
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	415,600.00	8,000.00	6,000.00	1,000.00	-	-	-	430,600.00
8 Indirect Cost (Schedule III)	58,248.00	1,121.23	840.92	140.14				60,350.30
9 Adjusted Gross Cost (Lines 7+8)	473,848.00	9,121.23	6,840.92	1,140.14	-	-	-	490,950.30
10 Total Units of Service								
11 Gross Cost Per Unit of Service	-	-	-	-	-	-	-	-
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service								
15 Contract Cost per Unit of Service								
16 Total Billing Units (M/C & Non-M/C)								
17 Contract Cost per Billing Unit								
18 Contract Gross Costs	473,848.00	9,121.23	6,840.92	1,140.14	-	-	-	490,950.30
Less Contract Revenues:								
19 Patient Fees	2,008.30							2,008.30
20 Other Patient Insurance								
21 Medicare								
22 Other Revenues: (Specify)								
23 Total Contract Revenues	\$2,008.30							\$2,008.30
24 Contract Maximum/Net Cost (Line 18-23)	471,839.70	9,121.23	6,840.92	1,140.14	-	-	-	488,942.00
25 Net Cost per Billing Unit								
26 Total SD/MC Billing Units								
27 Percentage of SD/MC billing units to total billing units (Line 26/Line 16)								
28 Medi-Cal Gross	-	-	-	-	-	-	-	-
29 FFP Revenue	-	-	-	-	-	-	-	-
30 EPSDT Revenue (for EPSDT Program only)								

Contractor's
Authorized Signature

Approved By:
(For County Use Only)

[Signature]
Name/Title
[Signature]
Program Monitor's Approval / CAU Approval

Date: 6/29/11

Date: 6/30/11

FUNDING SOURCE

SD/MC FFP	-
MAA Medi-Cal	
SAMHSA	
PATH Allocation	
Other	
MHSA (FFP match)	-
MHSA	488,942.00
Contract Maximum	488,942.00

COMPARATIVE ANALYSIS (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)								
Adult/Child	Older Adults	Older Adults	Older Adults	Older Adults				
Service Function	Housing	Housing	Housing	Housing			Page 2	Cost
Budgeted Contract Maximum (Net Cost)	471,839.70	9,121.23	6,840.92	1,140.14				488,942.00
Prior Approved Budget Contract Maximum (Net Cost)	454,058.00	34,884.00						488,942.00
NET CHANGE/Increase (Decrease)	17,781.70	(25,762.77)	6,840.92	1,140.14	-	-	-	0.00
Budgeted Total Billing Units								
Prior Approved Budget Total Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted SD/MC Billing Units								
Prior Approved Budget SD/MC Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted Percentage of SD/MC Units to Total								
Prior Approved Budget Percentage of SD/MC Units to Total								

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Summary

Contractor Name: Heritage Clinic
Program Name: FSP - Housing
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37
Contract Number: 517612
Amendment Number: 13

Cost Center	G	H	I	J	K	L	M	Program
1 Adult/Child								Cost
2 Service Function								Page 2
3 Full Day, 1/2 day (Day Services Only)								Subtotal
Gross Cost:								
4 Salaries and Benefits (Schedule I)								
5 Operating Expenses (Schedule IA)								
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	-	-	-	-	-	-	-	-
8 Indirect Cost (Schedule III)								
9 Adjusted Gross Cost (Lines 7+8)	-	-	-	-	-	-	-	-
10 Total Units of Service								
11 Cost Per Unit of Service								
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service								
15 Contract Cost per Units of Service								
16 Total Billing Units (M/C & Non-M/C)								
17 Contract Cost per Billing Unit								
18 Contract Gross Costs	-	-	-	-	-	-	-	-
Less Contract Revenues:								
19 Patient Fees								
20 Other Patient Insurance								
21 Medicare								
22 Other Revenues: (Specify)								
23 Total Contract Revenues								
24 Contract Maximum/Net Cost (Line 18-23)	-	-	-	-	-	-	-	-
25 Net Cost per Billing Unit								
26 Total SD/MC Billing Units								
27 Percentage of SD/MC billing units to total billing units (Line 26/Line 16)								
28 Medi-Cal Gross	-	-	-	-	-	-	-	-
29 FFP Revenue	-	-	-	-	-	-	-	-
30 EPSDT Revenue (for EPSDT Program only)	-	-	-	-	-	-	-	-

C O M P A R A T I V E A N A L Y S I S (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)								
Adult/Child								
Service Function								Page 2 TTL
Budgeted Contract Maximum (Net Cost)								
Prior Year Actual Contract Maximum (Net Cost)								
NET CHANGE/Increase (Decrease)	-	-	-	-	-	-	-	-
Budgeted Total Billing Units								
Prior Year Actual Total Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted SD/MC Billing Units								
Prior Year Actual SD/MC Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted Percentage of SD/MC Units to Total								
Prior Year Percentage of SD/MC Units to Total								

Service Function		
Day/Comm Svcs (Mode 10)	24 Hour (Mode 5)	Outpatient (Mode 15)
Intensive (Full SFC 85-89, 1/2 SFC 81-84)	Crisis Residential (SFC 40-49)	M.H. Services (SFC 10-19)
Rehab (Full SFC 95-99, 1/2 SFC 91-94)	Adult Residential (SFC 65-79)	Med. Support (SFC 60-69)
Socialization		Crisis Intervention (SFC 70-79)
Community Services		C.M. Brokerage (SFC 01-09)
MHSA Service Function (no units of service will be reported) - Mode 60		
Client Housing Support (SFC 70)	Client Housing Operating (SFC 71)	Client Flexible Support (SFC 72)
Non-Medi-Cal Capital Assets (SFC 75)	Other Non-Medi-Cal Client Support Svcs (SFC 78)	

*** For Mental Health Services (MHS) units. List budgeted units and billing units by Service Function ***					
Service Function	Assessment	Collateral	Group	Individual	Total
1 Mental Health Units of Service					
2 Billing Units (M/C & Non-M/C)					

**County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Schedule I - Salaries and Benefits**

Contractor Name: Heritage Clinic
Program Name: FSP - Housing
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37JF
Contract Number: 517612
Amendment Number: 13

CURRENT YEAR / PROPOSED BUDGET

Salaries and Benefits		Annual	Annualized	Annualized	Number	Direct	Program	Total
Staff Position		Salary	FTE	FTE Prog.	of	Services	Admin.	Salary
		per FTE	Direct	Admin.	Months	Expense	Expense	Expense
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
Sub Total FTE and Salaries					N/A			
						Total Employee Benefits		
						*Salaries & Benefits Total		

PRIOR APPROVED BUDGET

Salaries and Benefits		Annual	Annualized	Annualized	Number	Direct	Program	Total
Staff Position		Salary	FTE	FTE Prog.	of	Services	Admin.	Salary
		per FTE	Direct	Admin.	Months	Expense	Expense	Expense
51								
52								
53								
54								
55								
56								
57								
58								
59								
60								
61								
62								
Sub Total FTE and Salaries					N/A			
						Total Employee Benefits		
						*Salaries & Benefits Total		

NET CHANGE OF CURRENT YEAR AND PRIOR APPROVED BUDGETS

Salaries and Benefits		Annual	Annualized	Annualized	Number	Direct	Program	Total
Staff Position		Salary	FTE	FTE Prog.	of	Services	Admin.	Salary
		per FTE	Direct	Admin.	Months	Expense	Expense	Expense
101								
102								
103								
104								
105								
106								
107								
108								
109								
110								
111								
112								
Sub Total FTE and Salaries					N/A			
						Total Employee Benefits		
						*Salaries & Benefits Total		

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Agreement Budget Schedule IA – Operating Expenses

Contractor Name: Heritage Clinic
Program Name: FSP - Housing
For the Period From: July 1, 2011

Provider Number: 37KJ, 37J1, 37JP
Contract Number: 517612
To: June 30, 2012
Amendment Number: 13

		CURRENT/ PROPOSED BUDGET	PRIOR APPROVED BUDGET	NET CHANGE/ INCREASE (DECREASE)
		Amount	Amount	Amount
Operating Expenses				
1	Building Rent & Leases	415,600.00	400,000.00	\$15,600.00
2	Equipment Rent & Leases	0.00	50.00	(\$50.00)
3	Building Repairs/Maintenance	0.00	250.00	(\$250.00)
4	Equipment Repair/Maintenance	0.00	250.00	(\$250.00)
5	*Leasehold Improvements			\$0.00
6	Telephone	0.00	1,000.00	(\$1,000.00)
7	Utilities	3,000.00	3,000.00	\$0.00
8	Supplies Minor Equipment	3,000.00	3,000.00	\$0.00
9	Office Supplies			\$0.00
10	Pharmaceutical			\$0.00
11	Medical Supplies			\$0.00
12	Other Supplies	2,000.00	250.00	\$1,750.00
13	Printing			\$0.00
14	Insurance: Professional Liability			\$0.00
15	Insurance: Other			\$0.00
16	*Consultants (from Schedule II)	0.00		\$0.00
17	Staff Development/Training	0.00	1,000.00	(\$1,000.00)
18	Accounting/Auditing/Legal Fees	0.00	500.00	(\$500.00)
19	Other Business Services	5,000.00	2,500.00	\$2,500.00
20	24 Hour Program: Food			\$0.00
21	24 Hour Program: Personal Needs Items			\$0.00
22	Laboratory Services			\$0.00
23	Travel Local	0.00	500.00	(\$500.00)
24	Client Transportation	1,000.00	50.00	\$950.00
25	Dues and Subscriptions	0.00	250.00	(\$250.00)
26	*Interest Expense	1,000.00	1,000.00	\$0.00
27	Tax/License	0.00	1,000.00	(\$1,000.00)
28	Gift Cards			\$0.00
29	Other: Flex Funds	0.00	16,000.00	(\$16,000.00)
	Operating Expenses Total	\$430,600.00	\$430,600.00	\$0.00

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

#1 Building and Rent is SFC 70 as housing support and housing subsidies.

#7 Utilities and #19 Other Business services are SFC 71. Utilities and other operating operating costs i.e. credit reports, hiring of movers, U-haul rentals, etc...

#8 So=supplies Minor Equipment, #12 Other Supplies and #24 Client Transportation are SFC 72 under goods , other items necessary for daily living, travel and transportation, i.e. taxi fees or bus tokens for clients. These also include buying furniture or mattresses, etc...

#26 Interest Expenses are under SFC 78, as related general operating expenditures incurred in providing non-Medi-Cal client supports.

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Contract Budget Schedule II – Fixed Assets and Consultants

Contractor Name: Heritage Clinic
Program Name: FSP - Housing
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37JP
Contract Number: 517612
Amendment Number: 13

Fixed Assets						
	Description of Fixed Asset	# of Units		Cost per Unit	Total Cost	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
Total Fixed Assets						

Consultant Agreements – Direct Services						
	Name	Agency	Position Class	Hours	Rate	Amount
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
Total Direct Services Consultants						

Consultant Agreements - Program Management Function						
	Name	Agency	Position Class	Hours	Rate	Amount
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
Total Program Management Function Consultants						

Total Consultant Agreements	
-----------------------------	--

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Contract Budget Schedule III – Indirect Costs

Contractor Name: Heritage Clinic
Program Name: FSP - Housing
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ, 37J1, 37J
Contract Number: 517612
Amendment Number: 13

	Administrative Salaries and Benefits	Annual Salary	Annualized FTE	% of FTE Allocated	FTE Allocated	Number of Months	Total Salary Expense
	Staff Position	per FTE	Total	To Program	To Program		
1	Executive Staff	130,000.00	0.60	10.75%	0.06	12.00	\$8,385.00
2	Financial Administration	87,272.73	1.10	10.75%	0.12	12.00	\$10,320.00
3	Clinical Administration	54,116.48	2.87	10.75%	0.31	12.00	\$16,696.29
4	HR Administration	53,795.54	1.53	10.75%	0.16	12.00	\$8,848.02
5							
6							
7							
8							
9							
10							
11							
12							
Sub Total FTE and Salaries			6.10	N/A	0.66	N/A	\$44,249.31

	Administrative Operating Expenses	Amount	% Allocated to Program	Indirect Cost
13	Accounting/Adult/Legal/ADP Fees	500.00	10.75%	\$53.75
14	Mileage	8,000.00	10.75%	\$860.00
15	Telephone	11,000.00	10.75%	\$1,182.50
16	Office Supplies	600.00	10.75%	\$64.50
17	Other Business Services	1,500.00	10.75%	\$161.25
18	Staff Development and Training	5,000.00	10.75%	\$537.50
19	Insurance	500.00	10.75%	\$53.75
20	Dues & Subscriptions	8,000.00	10.75%	\$860.00
21	Equipment Repairs & Maintenance	5,000.00	10.75%	\$537.50
22	Travel/Transportation	5,887.54	10.75%	\$632.91
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
Admin. Operating Expenses Total		\$45,987.54	N/A	\$4,943.66

	Administrative Consultant Services	Amount	% Allocated to Program	Indirect Cost
36	Business Consultants	5,000.00	10.75%	\$537.50
37				
38				
Admin. Consultant Services Total		\$5,000.00	N/A	\$537.50

Total Administrative Benefits	10,619.83
Total Admin. Salaries & Benefits	\$54,869.14
Total Administrative Operating Expenses	\$4,943.66
Total Administrative Consultant Services	\$537.50
Total Indirect Costs	\$60,350.30

Indirect Costs Methodology
Indirect Costs are allocated to all programs based on each programs proportiona of direct expenses to overall direct expenses (salaried, benefits and operating)

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Summary

☒ MHPSA

☐ Non-MHPSA

Contractor Name: Heritage Clinic
 Program Name: Strength Based Care Management
 For the Period From: July 1, 2011 To: June 30, 2012

Provider Number: 37KJ,37J1, 37.
 Contract Number: 517612
 Amendment Number: 13

This budget will remain in effect throughout the entire contract term unless amended.

RU# or Sub-unit #: 3425, 3435, 34

Cost Center	A	B	C	D	E	F	Program	Total
1 Adult/Child	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults	Cost	Program
2 Service Function	MH Services	Crisis Interv.	Medication	CM Brokerage		Flex Funds	Page 2	Cost
3 Full Day, 1/2 day (Day Services Only)							Subtotal	
Gross Cost:								
4 Salaries and Benefits (Schedule I)	389,979.89	801.78	14,650.22	316,177.47				721,609.36
5 Operating Expenses (Schedule IA)	102,748.68	346.63	4,859.51	84,188.94		4,000.00		196,143.76
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	492,728.57	1,148.41	19,509.73	400,366.41	-	4,000.00	-	917,753.12
8 Indirect Cost (Schedule III)	62,808.18	728.15	6,725.91	51,644.85		471.16		122,378.25
9 Adjusted Gross Cost (Lines 7+8)	555,536.75	1,876.56	26,235.64	452,011.26	-	4,471.16	-	1,040,131.37
10 Total Units of Service	3,318	8	87	4,407				7,819
11 Gross Cost Per Unit of Service	167.46	249.10	302.34	102.56	-	-	-	133.03
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service	3,318	8	87	4,407				7,819
15 Contract Cost per Unit of Service	\$167.46	\$249.10	\$302.34	\$102.56				\$133.03
16 Total Billing Units (M/C & Non-M/C)	248,813	565	6,397	264,425				520,200
17 Contract Cost per Billing Unit	\$2.23	\$3.32	\$4.10	\$1.71				\$2.00
18 Contract Gross Costs	555,536.75	1,876.56	26,235.64	452,011.26	-	4,471.16	-	1,040,131.37
Less Contract Revenues:								
19 Patient Fees								
20 Other Patient Insurance								
21 Medicare	6,581.37							6,581.37
22 Other Revenues: (Specify)								
23 Total Contract Revenues	\$6,581.37							\$6,581.37
24 Contract Maximum/Net Cost (Line 18-23)	548,955.38	1,876.56	26,235.64	452,011.26	-	4,471.16	-	1,033,550.00
25 Net Cost per Billing Unit	\$2.21	\$3.32	\$4.10	\$1.71				\$1.99
26 Total SD/MC Billing Units	93,696	213	2,409	99,575				195,892
27 Percentage of SD/MC billing units to total billing units (Line 26/Line 16)	37.66%	37.66%	37.66%	37.66%				37.66%
28 Medi-Cal Gross	209,199.24	706.66	9,879.59	170,214.50	-	-	-	390,000.00
29 FFP Revenue	104,599.62	353.33	4,939.80	85,107.25	-	-	-	195,000.00
30 EPSDT Revenue (for EPSDT Program only)								

Contractor's
Authorized Signature

Approved By:
(For County Use Only)

[Signature] / CEO
 Name/Title
[Signature]
 Program Monitor's Approval / CAU Approval

Date: 6/29/11

Date: 6/30/11

FUNDING SOURCE

SD/MC FFP	195,000.00
MAA Medi-Cal	
SAMHSA	
PATH Allocation	
Other	
MHPSA (FFP match)	195,000.00
MHPSA	643,550.01
Contract Maximum	1,033,550.00

COMPARATIVE ANALYSIS (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)								
Adult/Child	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults	Older Adults		
Service Function	MH Services	Crisis Interv.	Medication	CM Brokerage		Flex Funds	Page 2	Cost
Budgeted Contract Maximum (Net Cost)	548,955.38	1,876.56	26,235.64	452,011.26		4,471.16		1,033,550.00
Prior Approved Budget Contract Maximum (Net Cost)	527,328.19	6,156.72	56,992.12	438,567.97		4,505.00		1,033,550.00
NET CHANGE/Increase (Decrease)	21,627.19	(4,280.16)	(30,756.48)	13,443.29	-	(33.84)	-	0.00
Budgeted Total Billing Units	248,813	565	6,397	264,425				520,200
Prior Approved Budget Total Billing Units	298,275	2,325	17,325	318,120				636,045
NET CHANGE/Increase (Decrease)	(49,462)	(1,760)	(10,928)	(53,695)				(115,845)
Budgeted SD/MC Billing Units	93,696	213	2,409	99,575				195,892
Prior Approved Budget SD/MC Billing Units	172,767	1,347	10,035	184,261				368,410
NET CHANGE/Increase (Decrease)	(79,071)	(1,134)	(7,626)	(84,686)				(172,518)
Budgeted Percentage of SD/MC Units to Total	37.66%	37.66%	37.66%	37.66%				37.66%
Prior Approved Budget Percentage of SD/MC Units to Total	57.92%	57.94%	57.92%	57.92%				57.92%

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Summary

Contractor Name: Heritage Clinic
Program Name: Strength Based Care Managemnt
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ,37J1, 37.
Contract Number: 517612
Amendment Number: 13

Cost Center	G	H	I	J	K	L	M	Program
1 Adult/Child								Cost
2 Service Function								Page 2
3 Full Day, 1/2 day (Day Services Only)								Subtotal
Gross Cost:								
4 Salaries and Benefits (Schedule I)								
5 Operating Expenses (Schedule IA)								
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	-	-	-	-	-	-	-	-
8 Indirect Cost (Schedule III)								
9 Adjusted Gross Cost (Lines 7+8)	-	-	-	-	-	-	-	-
10 Total Units of Service								
11 Cost Per Unit of Service								
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service								
15 Contract Cost per Units of Service								
16 Total Billing Units (M/C & Non-M/C)								
17 Contract Cost per Billing Unit								
18 Contract Gross Costs	-	-	-	-	-	-	-	-
Less Contract Revenues:								
19 Patient Fees								
20 Other Patient Insurance								
21 Medicare								
22 Other Revenues: (Specify)								
23 Total Contract Revenues								
24 Contract Maximum/Net Cost (Line 18-23)	-	-	-	-	-	-	-	-
25 Net Cost per Billing Unit								
26 Total SD/MC Billing Units								
27 Percentage of SD/MC billing units to total billing units (Line 26/Line16)								
28 Medi-Cal Gross	-	-	-	-	-	-	-	-
29 FFP Revenue	-	-	-	-	-	-	-	-
30 EPSDT Revenue (for EPSDT Program only)	-	-	-	-	-	-	-	-

C O M P A R A T I V E A N A L Y S I S (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)								
Adult/Child								
Service Function								Page 2 TTL
Budgeted Contract Maximum (Net Cost)								
Prior Year Actual Contract Maximum (Net Cost)								
NET CHANGE/Increase (Decrease)	-	-	-	-	-	-	-	-
Budgeted Total Billing Units								
Prior Year Actual Total Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted SD/MC Billing Units								
Prior Year Actual SD/MC Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted Percentage of SD/MC Units to Total								
Prior Year Percentage of SD/MC Units to Total								

Service Function		
Day/Comm Svcs (Mode 10)	24 Hour (Mode 5)	Outpatient (Mode 15)
Intensive (Full SFC 85-89, 1/2 SFC 81-84)	Crisis Residential (SFC 40-49)	M.H. Services (SFC 10-19)
Rehab (Full SFC 95-99, 1/2 SFC 91-94)	Adult Residential (SFC 65-79)	Med. Support (SFC 60-69)
Socialization		Crisis Intervention (SFC 70-79)
Community Services		C.M. Brokerage (SFC 01-09)
MHSA Service Function (no units of service will be reported) - Mode 60		
Client Housing Support (SFC 70)	Client Housing Operating (SFC 71)	Client Flexible Support (SFC 72)
Non-Medi-Cal Capital Assets (SFC 75)	Other Non-Medi-Cal Client Support Svcs (SFC 78)	

*** For Mental Health Services (MHS) units. List budgeted units and billing units by Service Function ***						
Service Function	Assessment	Collateral	Group	Individual	Total	
1 Mental Health Units of Service	12,441	24,881	12,441	199,050	248,813	
2 Billing Units (M/C & Non-M/C)	166	332	166	2,654	3,318	

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Agreement Budget Schedule IA – Operating Expenses

Contractor Name: Heritage Clinic

Provider Number: 37KJ,37J1, 37JP

Program Name: Strength Based Care Managemnt

Contract Number: 517612

For the Period From: July 1, 2011

To: June 30, 2012

Amendment Number: 13

		CURRENT/ PROPOSED BUDGET	PRIOR APPROVED BUDGET	NET CHANGE/ INCREASE (DECREASE)
		Amount	Amount	Amount
	Operating Expenses			
1	Building Rent & Leases	53,129.31	50,044.00	\$3,085.31
2	Equipment Rent & Leases		35.00	(\$35.00)
3	Building Repairs/Maintenance	4,266.00	4,281.00	(\$15.00)
4	Equipment Repair/Maintenance	1,487.00	1,373.00	\$114.00
5	*Leasehold Improvements			\$0.00
6	Telephone	13,835.00	17,845.00	(\$4,010.00)
7	Utilities	2,366.00	2,596.00	(\$230.00)
8	Supplies Minor Equipment	1,035.01	792.00	\$243.01
9	Office Supplies	4,088.00	4,445.00	(\$357.00)
10	Pharmaceutical	35.00	35.00	\$0.00
11	Medical Supplies	35.00	35.00	\$0.00
12	Other Supplies	1,699.23	674.00	\$1,025.23
13	Printing	1,353.41	2,372.00	(\$1,018.59)
14	Insurance: Professional Liability	5,118.10	7,492.00	(\$2,373.90)
15	Insurance: Other	1,716.59	35.00	\$1,681.59
16	*Consultants (from Schedule II)	24,878.01	16,200.00	\$8,678.01
17	Staff Development/Training	9,412.17	4,019.00	\$5,393.17
18	Accounting/Auditing/Legal Fees	16,560.20	23,355.00	(\$6,794.80)
19	Other Business Services	2,697.63	3,385.00	(\$687.37)
20	24 Hour Program: Food			\$0.00
21	24 Hour Program: Personal Needs Items			\$0.00
22	Laboratory Services	35.00	35.00	\$0.00
23	Travel Local	27,000.00	36,600.00	(\$9,600.00)
24	Client Transportation		33.00	(\$33.00)
25	Dues and Subscriptions	2,802.45	2,491.00	\$311.45
26	*Interest Expense	5,175.06	14,603.00	(\$9,427.94)
27	Tax/License	154.09	524.00	(\$369.91)
28	Gift Cards	0.00	0.00	\$0.00
29	Other: Market Street Facility Usage Fee	13,265.50	13,602.00	(\$336.50)
30	Flex Funds	4,000.00	4,000.00	\$0.00
	Operating Expenses Total	\$196,143.76	\$210,901.00	(\$14,757.24)

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

Market Street Facility - Usage Fees are in lieu of rent on the property as Heritage Clinic purchased the building in December 2008. the charges are the sum of the variable interest charges on the two loans secured for the purchase and the depreciation charges of \$550/mo based on 2% depreciation over 50 years. Due to less borrowing from the Line of Credit, the interest amount has been decreased from \$14,603 to \$5,175.06.

**County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Schedule I - Salaries and Benefits**

Contractor Name: Heritage Clinic
Program Name: Strength Based Care Management
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ,37J1, 37JP
Contract Number: 517612
Amendment Number: 13

CURRENT YEAR / PROPOSED BUDGET

Salaries and Benefits		Annual Salary	Annualized FTE	Annualized FTE Prog.	Number of Months	Direct Services Expense	Program Admin. Expense	Total Salary Expense
Staff Position		per FTE	Direct	Admin.				
1	Program Managers	57,500.00		0.05750	12.00		3,306.25	\$3,306.25
2	LMHC's	58,287.50	2.18950	0.30130	12.00	127,620.48	17,562.02	\$145,182.50
3	MHRS's	38,509.61	5.44250		12.00	209,588.55		\$209,588.55
4	Case Manager	38,480.00	1.00000		12.00	38,480.00		\$38,480.00
5	Care Coordinators	29,320.07	1.37750		12.00	40,388.40		\$40,388.40
6	Compliance Officer / QI Officer	92,484.47		0.26590	12.00		24,591.62	\$24,591.62
7	Housing Managers	37,586.67	0.30000		12.00	11,276.00		\$11,276.00
8	Conservatorship Supervisor	55,000.00	0.10000	0.20000	12.00	5,500.00	11,000.00	\$16,500.00
9	Regional Managers	83,309.57		0.40250	12.00		33,532.10	\$33,532.10
10	Administrative, Program and Office Assistants	27,416.00	0.29830	0.86140	12.00	8,178.19	23,616.14	\$31,794.33
11	Fiscal Manager Cecilia Russell	29,112.29	0.16990	0.01890	12.00	4,946.18	550.22	\$5,496.40
12	Systems and Data Analyst	54,991.90		0.25190	12.00		13,852.46	\$13,852.46
13	Billing Coordinator	35,352.98		0.22500	12.00		7,954.42	\$7,954.42
14								
15								
Sub Total FTE and Salaries			10.87770	2.58440	N/A	\$445,977.80	\$135,965.23	\$581,943.03
		Total Employee Benefits						139,666.33
		*Salaries & Benefits Total						\$721,609.36

PRIOR APPROVED BUDGET

Salaries and Benefits		Annual Salary	Annualized FTE	Annualized FTE Prog.	Number of Months	Direct Services Expense	Program Admin. Expense	Total Salary Expense
Staff Position		per FTE	Direct	Admin.				
51	Program Managers							
52	LMHC's	60,638.33	2.64000		12.00	160,085.19		\$160,085.19
53	MHRS's	40,105.53	6.87000		12.00	275,525.00		\$275,525.00
54	Case Manager	30,737.00	0.82320	0.22320	12.00	25,302.70	6,860.50	\$32,163.20
55	Care Coordinators							
56	Compliance Officer / QI Officer							
57	Housing Managers							
58	Conservatorship Supervisor	55,000.00	0.15000	0.15000	12.00	8,250.00	8,250.00	\$16,500.00
59	Regional Managers	83,524.00		0.45000	12.00		37,585.80	\$37,585.80
60	Administrative, Program and Office Assistants	30,737.00		0.50000	12.00		15,368.50	\$15,368.50
61	Fiscal Manager							
62	Systems and Data Analyst	49,500.00		0.28330	12.00		14,023.35	\$14,023.35
63	Billing Coordinator	35,360.00		0.28330	12.00		10,017.49	\$10,017.49
64	Case Manager/MHRS	35,360.00	0.39450		12.00	13,949.52		\$13,949.52
65								
66								
67								
Sub Total FTE and Salaries			10.87770	1.88980	N/A	\$483,112.40	\$92,105.64	\$575,218.04
		Total Employee Benefits						126,544.67
		*Salaries & Benefits Total						\$701,762.71

NET CHANGE OF CURRENT YEAR AND PRIOR APPROVED BUDGETS

Salaries and Benefits		Annual Salary	Annualized FTE	Annualized FTE Prog.	Number of Months	Direct Services Expense	Program Admin. Expense	Total Salary Expense
Staff Position		per FTE	Direct	Admin.				
101	Program Managers	57,500.00		0.05750	12.00		3,306.25	\$3,306.25
102	LMHC's	(2,350.83)	(0.45050)	0.30130		(32,464.71)	17,562.02	(\$14,902.69)
103	MHRS's	(1,595.92)	(1.42750)			(65,936.45)		(\$65,936.45)
104	Case Manager	7,743.00	0.17680	(0.22320)		13,177.30	(6,860.50)	\$6,316.80
105	Care Coordinators	29,320.07	1.37750		12.00	40,388.40		\$40,388.40
106	Compliance Officer / QI Officer	92,484.47		0.26590	12.00		24,591.62	\$24,591.62
107	Housing Managers	37,586.67	0.30000		12.00	11,276.00		\$11,276.00
108	Conservatorship Supervisor		(0.05000)	0.05000		(2,750.00)	2,750.00	
109	Regional Managers	(214.43)		(0.04750)			(4,053.70)	(\$4,053.70)
110	Administrative, Program and Office Assistants	(3,321.00)	0.29830	0.36140		8,178.19	8,247.64	\$16,425.83
111	Fiscal Manager	29,112.29	0.16990	0.01890	12.00	4,946.18	550.22	\$5,496.40
112	Systems and Data Analyst	5,491.90		(0.03140)			(170.89)	(\$170.89)
113	Billing Coordinator	(7.02)		(0.05830)			(2,063.07)	(\$2,063.07)
114	Case Manager/MHRS	(35,360.00)	(0.39450)		(12.00)	(13,949.52)		(\$13,949.52)
115								
116								
117								
Sub Total FTE and Salaries			(0.00000)	0.69460	N/A	(\$37,134.61)	\$43,859.60	\$6,724.99

**County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Schedule I - Salaries and Benefits**

Contractor Name: Heritage Clinic Provider Number: 37KJ,37J1, 37JP
Program Name: Strength Based Care Managemnt Contract Number: 517612
For the Period From: July 1, 2011 To: June 30, 2012 Amendment Number: 13

Total Employee Benefits		13,121.66
*Salaries & Benefits Total		\$19,846.65

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Contract Budget Schedule II – Fixed Assets and Consultants

Contractor Name: Heritage Clinic
Program Name: Strength Based Care Managemnt
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number: 37KJ,37J1, 37JP
Contract Number: 517612
Amendment Number: 13

Fixed Assets						
	Description of Fixed Asset	# of Units		Cost per Unit	Total Cost	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
Total Fixed Assets						

Consultant Agreements – Direct Services						
	Name	Agency	Position Class	Hours	Rate	Amount
14			Geriatric Psychiatrist	127.21	150.00	\$19,081.94
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
Total Direct Services Consultants						\$19,081.94

Consultant Agreements - Program Management Function						
	Name	Agency	Position Class	Hours	Rate	Amount
25	Information Technology			57.96	100.00	\$5,796.07
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
Total Program Management Function Consultants						\$5,796.07

Total Consultant Agreements	\$24,878.01
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County of San Diego – Health and Human Services Agency

Behavioral Health Services - Mental Health Services

Contract Budget Schedule III – Indirect Costs

Contractor Name: Heritage Clinic
Program Name: Strength Based Care Managemnt
For the Period From: July 1, 2011

Provider Number: 37KJ,37J1, 37JI
Contract Number: 517612
Amendment Number: 13

Administrative Salaries and Benefits		Annual Salary per FTE	Annualized FTE Total	% of FTE Allocated To Program	FTE Allocated To Program	Number of Months	Total Salary Expense
Staff Position							
1	Executive Staff	130,000.00	0.60	22.78%	0.14	12.00	\$17,768.40
2	Financial Administration	87,272.73	1.10	22.78%	0.25	12.00	\$21,868.80
3	Clinical Administration	54,116.48	2.87	22.78%	0.65	12.00	\$35,380.60
4	HR Administration	53,795.54	1.53	22.78%	0.35	12.00	\$18,749.57
5							
6							
7							
8							
9							
10							
11							
12							
Sub Total FTE and Salaries			6.10	N/A	1.39	N/A	\$93,767.37

	Administrative Operating Expenses	Amount	% Allocated to Program	Indirect Cost
13	Accounting/Adult/Legal/ADP Fees	262.00	22.78%	\$59.68
14	Mileage	4,206.24	22.78%	\$958.18
15	Telephone	5,783.58	22.78%	\$1,317.50
16	Office Supplies	315.47	22.78%	\$71.86
17	Other Business Services	788.67	22.78%	\$179.66
18	Staff Development and Training	2,628.90	22.78%	\$598.86
19	Insurance	262.89	22.78%	\$59.89
20	Dues & Subscriptions	4,206.24	22.78%	\$958.18
21	Equipment Repairs & Maintenance	2,628.90	22.78%	\$598.86
22	Travel/Transportation	3,095.55	22.78%	\$705.17
23				
24				
25				
26				
27				
28				
29				
30				
31				
32				
33				
34				
35				
	Admin. Operating Expenses Total	\$24,178.44	N/A	\$5,507.85

Total Administrative Benefits	22,504.17
Total Admin. Salaries & Benefits	\$116,271.54
Total Administrative Operating Expenses	\$5,507.85
Total Administrative Consultant Services	\$598.86
Total Indirect Costs	\$122,378.25

Indirect Costs Methodology

Indirect Costs are allocated to all programs based on each programs proportiona of direct expenses to overall direct expenses (salaried, benefits and operating)

	Administrative Consultant Services			
36	Business Consultants	2,628.90	22.78%	\$598.86
37				
38				
	Admin. Consultant Services Total	\$2,628.90	N/A	\$598.86

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Summary

☐ MHSA

☒ Non-MHSA

Contractor Name: Heritage Clinic
 Program Name: Institutional Care Management
 For the Period From: July 1, 2011

To: June 30, 2012

Provider Number:
 Contract Number: 517612
 Amendment Number: 13

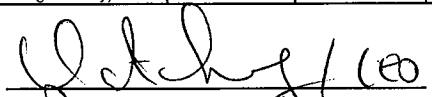
This budget will remain in effect throughout the entire contract term unless amended.

RU# or Sub-unit #: 3424, 3434,34

Cost Center	A	B	C	D	E	F	Program Cost	Total Program Cost
1 Adult/Child	Older Adults							
2 Service Function	Institutional							
3 Full Day, 1/2 day (Day Services Only)	Case Management							
Gross Cost:								
4 Salaries and Benefits (Schedule I)	250,455.82							250,455.82
5 Operating Expenses (Schedule IA)	48,885.74							48,885.74
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	299,341.56	-	-	-	-	-	-	299,341.56
8 Indirect Cost (Schedule III)	41,936.44							41,936.44
9 Adjusted Gross Cost (Lines 7+8)	341,278.00	-	-	-	-	-	-	341,278.00
10 Total Units of Service								
11 Gross Cost Per Unit of Service	-	-	-	-	-	-	-	-
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service								
15 Contract Cost per Unit of Service								
16 Total Billing Units (M/C & Non-M/C)	1,400							1,400
17 Contract Cost per Billing Unit	\$243.77							\$243.77
18 Contract Gross Costs	341,278.00	-	-	-	-	-	-	341,278.00
Less Contract Revenues:								
19 Patient Fees								
20 Other Patient Insurance								
21 Medicare								
22 Other Revenues: (Specify)								
23 Total Contract Revenues								
24 Contract Maximum/Net Cost (Line 18-23)	341,278.00	-	-	-	-	-	-	341,278.00
25 Net Cost per Billing Unit	\$243.77							\$243.77
26 Total SD/MC Billing Units								
27 Percentage of SD/MC billing units to total billing units (Line 26/Line16)								
28 Medi-Cal Gross	-	-	-	-	-	-	-	-
29 FFP Revenue	-	-	-	-	-	-	-	-
30 EPSDT Revenue (for EPSDT Program only)								

Contractor's
 Authorized Signature

Approved By:
 (For County Use Only)


 Name/Title
 Deborah Maldonado
 Program Monitor's Approval / CAU Approval

Date: 6/29/11

Date: 6/30/11

FUNDING SOURCE

SD/MC FFP	-
MAA Medi-Cal	
SAMHSA	
PATH Allocation	
Other	
MHSA	
NET	341,278.00
Contract Maximum	341,278.00

COMPARATIVE ANALYSIS (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)								
Adult/Child	Older Adults							
Service Function	Institutional						Page 2	Cost
Budgeted Contract Maximum (Net Cost)	341,278.00							341,278.00
Prior Approved Budget Contract Maximum (Net Cost)	341,278.00							341,278.00
NET CHANGE/Increase (Decrease)	-	-	-	-	-	-	-	-
Budgeted Total Billing Units	1,400							1,400
Prior Approved Budget Total Billing Units	1,400							1,400
NET CHANGE/Increase (Decrease)								
Budgeted SD/MC Billing Units								
Prior Approved Budget SD/MC Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted Percentage of SD/MC Units to Total								
Prior Approved Budget Percentage of SD/MC Units to Total								

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Summary

Contractor Name: Heritage Clinic
Program Name: Institutional Care Management
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number:
Contract Number: 517612
Amendment Number: 13

Cost Center	G	H	I	J	K	L	M	Program
1 Adult/Child								Cost
2 Service Function								Page 2
3 Full Day, 1/2 day (Day Services Only)								Subtotal
Gross Cost:								
4 Salaries and Benefits (Schedule I)								
5 Operating Expenses (Schedule IA)								
6 Fixed Assets (Schedule II)								
7 Gross Cost (Lines 4+5+6)	-	-	-	-	-	-	-	-
8 Indirect Cost (Schedule III)								
9 Adjusted Gross Cost (Lines 7+8)	-	-	-	-	-	-	-	-
10 Total Units of Service								
11 Cost Per Unit of Service								
Less Non-Contract Units and Costs								
12 Non Contract Units of Service								
13 Non Contract Costs								
Balance								
14 Contract Units of Service								
15 Contract Cost per Units of Service								
16 Total Billing Units (M/C & Non-M/C)								
17 Contract Cost per Billing Unit								
18 Contract Gross Costs	-	-	-	-	-	-	-	-
Less Contract Revenues:								
19 Patient Fees								
20 Other Patient Insurance								
21 Medicare								
22 Other Revenues: (Specify)								
23 Total Contract Revenues								
24 Contract Maximum/Net Cost (Line 18-23)	-	-	-	-	-	-	-	-
25 Net Cost per Billing Unit								
26 Total SD/MC Billing Units								
27 Percentage of SD/MC billing units to total billing units (Line 26/Line 16)								
28 Medi-Cal Gross	-	-	-	-	-	-	-	-
29 FFP Revenue	-	-	-	-	-	-	-	-
30 EPSDT Revenue (for EPSDT Program only)	-	-	-	-	-	-	-	-

C O M P A R A T I V E A N A L Y S I S (CURRENT YEAR BUDGET V.S. PRIOR APPROVED BUDGET)								
Adult/Child								
Service Function								Page 2 TTL
Budgeted Contract Maximum (Net Cost)								
Prior Year Actual Contract Maximum (Net Cost)								
NET CHANGE/Increase (Decrease)	-	-	-	-	-	-	-	-
Budgeted Total Billing Units								
Prior Year Actual Total Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted SD/MC Billing Units								
Prior Year Actual SD/MC Billing Units								
NET CHANGE/Increase (Decrease)								
Budgeted Percentage of SD/MC Units to Total								
Prior Year Percentage of SD/MC Units to Total								

Service Function		
Day/Comm Svcs (Mode 10)	24 Hour (Mode 5)	Outpatient (Mode 15)
Intensive (Full SFC 85-89, 1/2 SFC 81-84)	Crisis Residential (SFC 40-49)	M.H. Services (SFC 10-19)
Rehab (Full SFC 95-99, 1/2 SFC 91-94)	Adult Residential (SFC 65-79)	Med. Support (SFC 60-69)
Socialization		Crisis Intervention (SFC 70-79)
Community Services		C.M. Brokerage (SFC 01-09)
MHSA Service Function (no units of service will be reported) - Mode 60		
Client Housing Support (SFC 70)	Client Housing Operating (SFC 71)	Client Flexible Support (SFC 72)
Non-Medi-Cal Capital Assets (SFC 75)	Other Non-Medi-Cal Client Support Svcs (SFC 78)	

*** For Mental Health Services (MHS) units. List budgeted units and billing units by Service Function ***					
Service Function	Assessment	Collateral	Group	Individual	Total
1 Mental Health Units of Service					
2 Billing Units (M/C & Non-M/C)					

**County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Schedule I - Salaries and Benefits**

Contractor Name: Heritage Clinic
Program Name: Institutional Care Management
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number:
Contract Number: 517612
Amendment Number: 13

CURRENT YEAR / PROPOSED BUDGET

Salaries and Benefits		Annual Salary per FTE	Annualized FTE Direct	Annualized FTE Prog. Admin.	Number of Months	Direct Services Expense	Program Admin. Expense	Total Salary Expense
Staff Position								
1	MHRS's	35,880.00	4.00000		12.00	143,520.00		\$143,520.00
2	Compliance Officer / QI Officer	92,500.00		0.05000	12.00		4,625.00	\$4,625.00
3	Conservatorship Supervisor	55,000.00		0.64250	12.00		35,337.50	\$35,337.50
4	Regional Managers	85,000.00		0.05000	12.00		4,250.00	\$4,250.00
5	Administrative, Program and Office Assistants	24,960.00		0.50000	12.00		12,480.00	\$12,480.00
6	Billing Coordinator	35,360.00		0.05000	12.00		1,768.00	\$1,768.00
7	Data Analyst							
8	BA Level Case Manager Team Leader							
9	BA Level Case Manager							
10	Systems and Data Analyst							
11								
12								
13								
14								
15								
Sub Total FTE and Salaries			4.00000	1.29250	N/A	\$143,520.00	\$58,460.50	\$201,980.50
Total Employee Benefits								48,475.32
*Salaries & Benefits Total								\$250,455.82

PRIOR APPROVED BUDGET

Salaries and Benefits		Annual Salary per FTE	Annualized FTE Direct	Annualized FTE Prog. Admin.	Number of Months	Direct Services Expense	Program Admin. Expense	Total Salary Expense
Staff Position								
51	MHRS's							
52	Compliance Officer / QI Officer							
53	Conservatorship Supervisor	55,000.00	0.30000	0.40000	12.00	16,500.00	22,000.00	\$38,500.00
54	Regional Managers	83,594.00		0.05000	12.00		4,179.70	\$4,179.70
55	Administrative, Program and Office Assistants	31,200.00		0.50000	12.00		15,600.00	\$15,600.00
56	Billing Coordinator	35,360.00		0.05000	12.00		1,768.00	\$1,768.00
57	Data Analyst	49,500.00		0.05000	12.00		2,475.00	\$2,475.00
58	BA Level Case Manager Team Leader	37,440.00	0.90000	0.10000	12.00	33,696.00	3,744.00	\$37,440.00
59	BA Level Case Manager	35,360.00	2.70000	0.30000	12.00	95,472.00	10,608.00	\$106,080.00
60	Systems and Data Analyst	49,500.00		0.05000	12.00		2,475.00	\$2,475.00
61								
62								
63								
64								
65								
66								
67								
Sub Total FTE and Salaries			3.90000	1.50000	N/A	\$145,668.00	\$62,849.70	\$208,517.70
Total Employee Benefits								45,521.79
*Salaries & Benefits Total								\$254,039.49

NET CHANGE OF CURRENT YEAR AND PRIOR APPROVED BUDGETS

Salaries and Benefits		Annual Salary per FTE	Annualized FTE Direct	Annualized FTE Prog. Admin.	Number of Months	Direct Services Expense	Program Admin. Expense	Total Salary Expense
Staff Position								
101	MHRS's	35,880.00	4.00000		12.00	143,520.00		\$143,520.00
102	Compliance Officer / QI Officer	92,500.00		0.05000	12.00		4,625.00	\$4,625.00
103	Conservatorship Supervisor		(0.30000)	0.24250		(16,500.00)	13,337.50	(\$3,162.50)
104	Regional Managers	1,406.00					70.30	\$70.30
105	Administrative, Program and Office Assistants	(6,240.00)					(3,120.00)	(\$3,120.00)
106	Billing Coordinator							
107	Data Analyst	(49,500.00)		(0.05000)	(12.00)		(2,475.00)	(\$2,475.00)
108	BA Level Case Manager Team Leader	(37,440.00)	(0.90000)	(0.10000)	(12.00)	(33,696.00)	(3,744.00)	(\$37,440.00)
109	BA Level Case Manager	(35,360.00)	(2.70000)	(0.30000)	(12.00)	(95,472.00)	(10,608.00)	(\$106,080.00)
110	Systems and Data Analyst	(49,500.00)		(0.05000)	(12.00)		(2,475.00)	(\$2,475.00)
111								
112								
113								
114								
115								
116								
117								
Sub Total FTE and Salaries			0.10000	(0.20750)	N/A	(\$2,148.00)	(\$4,389.20)	(\$6,537.20)

**County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Exhibit C – Agreement Budget Schedule I - Salaries and Benefits**

Contractor Name: Heritage Clinic
Program Name: Institutional Care Management
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number:
Contract Number: 517612
Amendment Number: 13

Total Employee Benefits		2,953.53
*Salaries & Benefits Total		(\$3,583.67)

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Agreement Budget Schedule IA – Operating Expenses

Contractor Name: Heritage Clinic
Program Name: Institutional Care Management
For the Period From: July 1, 2011

Provider Number:
Contract Number: 517612
To: June 30, 2012
Amendment Number: 13

		CURRENT/ PROPOSED BUDGET	PRIOR APPROVED BUDGET	NET CHANGE/ INCREASE (DECREASE)
	Operating Expenses	Amount	Amount	Amount
1	Building Rent & Leases	13,984.20	6,826.00	\$7,158.20
2	Equipment Rent & Leases		15.00	(\$15.00)
3	Building Repairs/Maintenance	1,463.00	1,536.00	(\$73.00)
4	Equipment Repair/Maintenance	510.00	493.00	\$17.00
5	*Leasehold Improvements			\$0.00
6	Telephone	4,745.00	6,023.00	(\$1,278.00)
7	Utilities	811.00	1,291.00	(\$480.00)
8	Supplies Minor Equipment	355.04	50.00	\$305.04
9	Office Supplies	1,402.00	1,595.00	(\$193.00)
10	Pharmaceutical		15.00	(\$15.00)
11	Medical Supplies		15.00	(\$15.00)
12	Other Supplies	241.00	241.00	\$0.00
13	Printing	464.26	851.00	(\$386.74)
14	Insurance: Professional Liability	1,755.67	2,957.00	(\$1,201.33)
15	Insurance: Other	588.85	15.00	\$573.85
16	*Consultants (from Schedule II)	1,988.24	3,226.00	(\$1,237.76)
17	Staff Development/Training	2,228.68	1,442.00	\$786.68
18	Accounting/Auditing/Legal Fees	4,680.00	4,228.00	\$452.00
19	Other Business Services	961.39	1,215.00	(\$253.61)
20	24 Hour Program: Food			\$0.00
21	24 Hour Program: Personal Needs Items			\$0.00
22	Laboratory Services		15.00	(\$15.00)
23	Travel Local	5,062.41	6,700.00	(\$1,637.59)
24	Client Transportation		54.00	(\$54.00)
25	Dues and Subscriptions	936.14	894.00	\$42.14
26	*Interest Expense	1,775.00	3,479.00	(\$1,704.00)
27	Tax/License	52.86	187.00	(\$134.14)
28	Gift Cards			\$0.00
29	Other: Market Street Facilities Usage Fees	4,881.00	4,881.00	\$0.00
	Operating Expenses Total	\$48,885.74	\$48,244.00	\$641.74

* May not be exceeded without prior HHSA approval.

NARRATIVE EXPLANATION OF REQUESTED CHANGE

County of San Diego – Health and Human Services Agency
Behavioral Health Services - Mental Health Services
Contract Budget Schedule II – Fixed Assets and Consultants

Contractor Name: Heritage Clinic
Program Name: Institutional Care Management
For the Period From: July 1, 2011

To: June 30, 2012

Provider Number:
Contract Number: 517612
Amendment Number: 13

Fixed Assets						
	Description of Fixed Asset	# of Units		Cost per Unit	Total Cost	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
Total Fixed Assets						

Consultant Agreements – Direct Services						
	Name	Agency	Position Class	Hours	Rate	Amount
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
Total Direct Services Consultants						

Consultant Agreements - Program Management Function						
	Name	Agency	Position Class	Hours	Rate	Amount
25	Information Technology			19.88	100.00	\$1,988.24
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
Total Program Management Function Consultants					\$1,988.24	

Total Consultant Agreements					\$1,988.24	
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Provider Number:
Contract Number: 517612
Amendment Number: 13

Total Administrative Benefits	7,379.55
Total Admin. Salaries & Benefits	\$38,127.67
Total Administrative Operating Expenses	\$3,435.27
Total Administrative Consultant Services	\$373.50
Total Indirect Costs	\$41,936.44

Indirect Costs Methodology
<p>Indirect Costs are allocated to all programs based on each programs proportiona of direct expenses to overall direct expenses (salaried, benefits and operating)</p>